

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Pa	atent Application of)	MAIL STOP: AF
Dally N	MOYA et al)	Group Art Unit: 1713
Applica	ntion No.: 09/917,674)	Examiner: Tatyana Zalukaeva
Filed: For:	July 31, 2001 (METH)ACRYLIC ESTER BINDERS FROM GLYCOLYZED AROMATIC POLYESTERS)))))	MAIL STOP: AF Group Art Unit: 1713 Examiner: Tatyana Zalukaeva Confirmation No.: 1178
	AMENDMENT/REPLY T	<u>RAN</u>	NSMITTAL LETTER
P.O. B	ssioner for Patents ox 1450 dria, VA 22313-1450		•
Sir:			
En	closed is a reply for the above-identified pa	tent	application.
[X	A Petition for Extension of Time is also	enc	losed.
[]	A Terminal Disclaimer and the [] \$55.0 C.F.R. § 1.20(d) are also enclosed.	00 (2	814) [] \$110.00 (1814) fee due under 37
[]	Also enclosed is/are		•
[]	Small entity status is hereby claimed.		
[]	Applicant(s) requests continued examina [] \$375.00 (2801) [] \$750.00 (1801) f		under 37 C.F.R. § 1.114 and enclose the ue under 37 C.F.R. § 1.17(e).
			y unentered after final amendments <u>not</u> be uested based on the enclosed documents
	[] Applicant(s) previously submitted requested.	, (on, for which continued examination is
	does not exceed three months from	the	on by the Office until at least, which filing of this RCE, in accordance with e under 37 C.F.R. § 1.17(i) is enclosed.

Amendment/Reply Transmittal Letter Application No. <u>09/917,674</u> Attorney's Docket No. <u>003780-059</u> Page 2

[]	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a)
	(1809/2809) is also enclosed.

[] No additional claim fee is required.

[X] An additional claim fee is required, and is calculated as shown below:

		AMENDED	CLAIM	S	
	No. OF CLAIMS	Highest No. Of Claims Previously Paid for	EXTRA CLAIMS	RATE	ADD'L FEE
Total Claims	26	MINUS 25 =	1	× \$18.00 (1202) =	18.00
Independent Claims	2	MINUS 3 =	0	× \$84.00 (1201) =	0.00
If Amendment adds mu	ltiple depend	lent claims, add \$28	0.00 (1203)		0.00
Total Claim Amendmer	nt Fee				18.00
If small entity status is	claimed, sub	tract 50% of Total (Claim Amend	ment Fee	0.00
TOTAL ADDITIONA	L CLAIM F	EE DUE FOR TH	IS AMENDM	LENT	\$18.00

[] A total fee in the amount of \$ is enclosed.
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[X] Charge \$18.00 to Deposit Account No. 02-4800.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: August 15, 2003

George F. Lesmes Registration No. 19,995

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620